

Testimony submitted for: HB 7366
**AN ACT CONCERNING SCHOOL-BASED HEALTH CENTERS AND
COMMUNITY BASED HEALTH CENTERS**
Public Health Committee Hearing
March 14, 2007

To: Senator Handley, Representative Sayers and members of the Public Health Committee.

Thank you for the opportunity to provide testimony on RB 7366. I am commenting on School Based Health Centers and **School Health Services provided by school nurses**. I would like to recommend that “The Commissioner of Public Health and the Commissioner of Education establish a committee to assist the commissioners in examining and evaluating methods to strengthen and expand **health services and the delivery of care provided by school nurses in school** and through school health based centers.”

“School based health centers (SBHCs) are comprehensive primary health care facilities located within or on school grounds. They are staffed by multi-disciplinary teams of pediatric and adolescent health specialists, including nurse practitioners, physician assistants, social workers, doctors, and, in some cases, dentists and dental hygienists. SBHC services are aimed at, but not limited to, students who do not have access to a family doctor, or whose families have little or no health insurance. SBHC’s are licensed as outpatient clinics or as hospital satellites.” (Retrieved on 3/8/07 from http://www.dph.state.ct.us/bch/Family%20Health/sbhc_fact_sheet.html).

A SBHC is not the same as the school nurse’s office.

In the school setting, school health services, provided by school nurses, are separate and distinct from services provided by school based health centers. The school community consists of, but is not limited to, the child, the family, school administrators, teachers, support staff, secretaries, food service personnel, bus drivers, custodians and the community at large. School health services, provided by a qualified school nurse, offer a scope of prevention and intervention strategies that mirror the clinical services outlined in this bill. The school nurse is the “primary provider of school health clinical services”...in

school... “including, but not limited to, the following services: medical, behavioral health, oral health and prevention services, including obesity prevention and bullying prevention” (language taken from CB 6516).

School nurses provide services to a captive student audience in the form of health education, prevention, and intervention. Primary prevention is health promotion, compliance with state mandates related to physical examinations, immunizations and wellness initiatives, all within the scope of practice of the school nurse. Secondary prevention such as state mandated vision, hearing and postural screenings, results in early identification and prompt treatment of disease and/ or abnormalities which create barriers to learning. Tertiary prevention relates to students with disabilities and primarily is directed at maintaining a level of optimum health for students with special needs or health problems that need to be monitored or managed during the school day. Such students may require an individual health care plan, emergency plan, an IEP or 504 plan or the school nurse as advocate to support success in class and during extracurricular activities.

School nurses play a major role in the school community and the community at large in policy development, “Healthy Kids Initiatives”, School Wellness, Indoor Air Quality (“Tools for Schools”), Food Allergy, Family Resource Centers, Readiness programs, special needs preschool, and community based early child programs. They participate on preschool to kindergarten transition teams. School nurses are active in the community partnering with local health departments to develop Pandemic Flu Plans. They are involved in Homeland Security and community Emergency Response Plans. Individually and collectively, school nurses interact with the school, the family, and the community. School nurses provide health data to the State Departments of Education and Public Health to assist with tracking such things as the incidence of asthma and immunization rates. School nurses assist with surveys such as the Connecticut School Health Survey that collects information about youth risk behaviors, behaviors that lead to premature death and disabilities in Americans, and behaviors that impact student learning.

A quote found on the Department of Public Health website in regard to school health services indicates that **"The state... provides limited funds to communities to enhance existing school health services, i.e. school nursing services."**

(Retrieved 3/8/07 from

http://www.dph.state.ct.us/bch/Family%20Health/sbhc_fact_sheet.html).

In addition to examination, evaluation, and funding for SBHCs, we urge you to increase funding for qualified school nurses who provide school health services to every child in school. In addition to funding, standards for school nurses, in existence since 1982, must be updated to meet the needs of Connecticut school children in 2007. As front line and primary providers in our schools, school nurses are responsible for the health and safety of every child in school. They are responsible for the health and safety of the school community and the community at large. Adequate funding and revised standards for school nurses and school health services is needed so that every child has access to safe and appropriate school health services provided by a qualified school nurse.

Respectfully submitted by:

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